

Research Article

Reflections on the profile and competencies of the nurse coordinator neophyte in management in the Intensive Care Unit: Review Article

Cláudio José de Souza^{1*} and Geilsa Soraia Cavalcanti Valente²

*1Faculty of Graduate Studies and the Graduate School Bezerra de Araujo (FABA),Universidade Federal Fluminense - UFF. Fellow CNPq. Rio de Janeiro. Brazil

²Department of Nursing Fundamentals and Administration EEAAC / UFF, Rio de Janeiro. Brazil

*corresponding Author Email: claudioenfo@gmail.com, geilsavalente@yahoo.com.br

Accepted 27 June 2014

Abstract

Purpose: To think through the systematic review of the literature about the profile and skills necessary for the neophyte nurse coordinator can manage the Intensive Care Unit. Method: Literature review of exploratory, qualitative approach. The survey was conducted on the Virtual Health Library, at LILACS, SciELO, MEDLINE and BDENF. After collection held exploratory reading, selective, analytical and interpretive. Results: They point out that there are few studies on the profile and professional skills that the coordinator needs to manage in the Intensive Care Unit. Conclusion: It is concluded that there is a lack of studies that help to clearly define the responsibilities of the nurse coordinator, with this understanding sorely needed because the new organizational models aimed at competent professional that meets the institutional ideals, adding value to the work pursuit of excellence of care and assistance.

Keywords: Total Quality Management. Professional Competence. Management. Intensive Care Units

INTRODUCTION

We live in a new era, where technological innovation, communication, information, new models of organizational management, globalization, outsourcing of services and unemployment have led to significant changes in health organizations and work. This gained new dimensions requiring new knowledge and behaviors in which Nursing reaffirms its important position as a central service is indispensable, especially in the sphere gerencial (Alves and Feldman, 2011)

In a world with the characteristics that we have identified, it requires neophytes Professional ie, beginners in the field of management, critical attitude towards question his role and not only meet the questionable demands of the labor market, but to discuss them and act toward the necessary changes. Such behavior involves performing quality work, and so competente (Rios, 2011)

No real specific requirement profile for the coordination, institutions are subject to have various forms of management. With the lack of standardization of work platforms for these neophytes coordinators, the strategies to be implemented in its management may involve the dissociation of managerial work, thus rendering the assistance of assistematizada disintegrated and nursing which prevents a service with a view to quality.

According to the Board of the National Health Surveillance Agency RDC No. 07 of February 24, 2010, which establishes the minimum requirements for the operation of Intensive Care Units in both the public, private or charitable, civil or military sphere has the legal requirement that the nurse as coordinator for the care has the title of specialist in

Intensive Care or other area that covers the patient care grave(Ministry of Health. National Health Surveillance Agency, 2010).

Once, beyond these minimum prerequisites, these professionals need to have the fitness for service and skills development to the viability of daily activities, whether in management or care sphere.

Based on the division of labor, has been here two subdivisions of categories, which is called clinical nurse, the professional who is responsible for conducting the procedures and care at the bedside and the nurse coordinator, a professional who is responsible for managing the unit, with the bureaucratic part, anticipating and providing the unit of inputs and human resources.

This division is notorious within the organizational estrutrura both to chart how the eyes of the employees who work there. Although they are two distinct functions, they complement each other all the time, these were coming can confirm that no quality management without this coordinator is involved with the tour and there will be quality care without this clinical nurse is committed to managerial issues of the unit.

The management action is intrinsically related to the ways of interaction with your team, because it is through the equilibrium that can succeed in the work process. The nurse coordinator must be aware of the organizational structure of your industry, opting for strategies that ensure harmony, functioning of the service and seeking to eliminate dissent.

A priori, this neophyte nurse coordinator, has generally added to your professional profile simply operational practice, in some cases unaware of management tooling platform that can underpin their work. In this sense it is important to check how critical reflection contributes to new ways of looking at the work reality and changes in practices cotidianas.4 In consequences of the facts, not all professionals have this attitude of empowering yourself to accumulate knowledge through continuing education and are thus theoretically able to manage a unit.

Because of this context, leads us to think that the acquisition of knowledge is need to mobilize the skills in the spheres: motor, cognitive, social and what it takes to provide the individual an understanding of when, how and why to use these conhecimentos.5 Corroborating this author, it is understood that while nurses neophytes coordinators need, look in other areas as in the Administration in Human Resources, Engineering, tools that can serve as the basis and platform for management based within the standards that today today requires us.

Drawing on these assumptions, there are literatures whose proposal is the creation of a bibliography that you can equip, support and meet the demand of the current market, developing this work with no rules to be followed as a testament, but providing various management tools, in order to create space for discussion and reflection on the various management approaches in hospitals in different looks. In this work are punctuated some management tools that can back up the managerial actions of this nurse coordinator neophyte as: Organizational Climate Survey; Performance Assessment, Evaluation of 360 degrees; Balanced Scorecard, Nursing Activities Score (NAS), Therapeutic Intervention Scoring System (TISS), PDCA cycle (P-Plan / Plan: D-Do / Do, C-Check / Check, A-Act / Act) among others (Alves and Feldman, 2011)

It is understood that the professional, who is also incomplete, ie, is in constant construction and therefore needs to be reworked, contextualized, and confronted approached by other knowledge, to transform this knowledge into something useful to know is that this study aims to foster discussions and reflections in this sphere since the literature and recent studies focus on the managerial profile in Nurse Nurse Manager and not in Coordenador (Leonello and Oliveira, 2008)

Taking advantage of these assertions, this article aims to foster space for discussion and reflection through systematic review on the profile and skills for nurses, coordinators neophytes can manage an Intensive Care Unit. Since in the field of professional practice in some cases there is no minimum requirement for a profile so that these professionals can take charge of coordination, and a portion of these simply brings with it the baggage of practice-technologic activities in the first instance will not be enough to guide their management functions, having to learn to everyday situations and to find strategies for the implementation of their managerial work.

METHODOLOGY

This study refers to a qualitative, bibliographic research, the exploratory as it aims to provide greater familiarity with the problem, in order to make it more explícito (Figueiredo, 2008)

The research was guided by the following question: What is the profile and managerial skills that nurses need to have a novice engineer to manage an Intensive Care Unit?

Therefore, a literature through the Virtual Health Library (VHL) was performed specifically at LILACS, MEDLINE, SciELO and BDENF. Used to search the following descriptors: Total Quality Management; Professional Competence; Management and Intensive Care Units.

To better group, it was decided to start work selecting items with them individually and then associated descriptors according to Table 1.

Table 1. Items found with single descriptor and in combination

Descriptor SINGLE	Databases				
	LILACS	MEDLINE	BDENF	SciELO	Total
Total Quality Management	244	11.674	28	69	12.015
Professional Competence	604	19.290	132	166	20.192
management	1.060	0	86	579	1.725
Intensive Care Units	1.952	33.189	714	381	36.236
KEY PARTNERS					
Total Quality Management and Professional Competence	03	271	02	0	276
Management and Total Quality Management	14	0	01	04	19
Total Quality Management and Intensive Care Units	0	145	0	01	146
Professional Competence and Management	15	0	09	07	31
Professional Competence and Intensive Care Units	04	48	0	03	55
Management and Intensive Care Units	01	0	02	02	55

After data collection was performed an exploratory reading, which is characterized as a reading race, aiming to highlight the text answer the proposed objective. Then there was a selective reading, selecting and evaluating the contribution of each text and its main topics eliminating repetidos (Andrade, 1997)

RESULTS AND DISCUSSION

The research encompassed potential bibliography of 10 items, with 07 of the SciELO; Rev 02 and 01 BDENF, which showed a sequence from the formation to the management practice of the professional nurse.

Table 2. Bibliography potential. 2005-2012

Scientific Production	Year	Base / Magazine
The training and the nursing management practice: pathways for transforming praxis.	2008	SCIELO/Rev Latino-Am. Enfermagem
Managerial skills of nurses: a new old challenge?	2006	SCIELO/Texto Contexto Enferm, Florianópolis
Contribution to knowledge in nursing management on management by competence	2007	LILACS/Rev Gaúcha Enferm, Porto Alegre
Meanings Management Intensive Care Unit for nurses	2009	SCIELO/Rev Gaúcha Enferm, Porto Alegre
Reflection on the management of nursing: we are all responsible?	2010	BDENF/Rev Enferm UFPE On Line.
The reflections of total quality management in Brazilian hospitals.	2005	SCIELO/Acta Rev Paul enferm
Customer Focus: essential tool in the management of competence in nursing	2010	SCIELO/Rev Bras Enferm
Patient classification system as management tools in Intensive Care Units	2007	LILACS/Rev Esc Enferm USP
Direction or coordination? Rethinking the institutional representation of nursing	2011	SCIELO/Rev Bras Enferm
Professional competence of nurses to work in intensive care units: an integrative review.	2012	SCIELO/Rev Latino-Am. Enfermagem

To facilitate reflection, tried to make a path to the present day about the changes in the educational framework and within the articles selected group, those who had a correlation with the theme.

One of the articles, 9 with a qualitative approach in dialectical perspective aimed to analyze the demands and expectations from the setting of management practices over the Pedagogic Project and the strategies that favor or not transformative praxis. The results indicate that the training and the practice nurse must go through the processes of work in the caring, managerial, educational and scientific research dimensions, building paths for the development of skills, greater interaction with teaching and service, note the Curriculum Guidelines current national.

Other authors, 10 encompass reflection on the role of the nurse as manager of nursing care in today's globalized world with its demands. Discussing the relevance of the preparation of this person to exercise its role in managerial skills, now widely diffused as a management style. Highlighting the importance of developing management skills for nurses after the graduation training and continuous services.

Continuing this line of reasoning other text, 11 bibliographic research conducted in the years 1999 to 2008 and this study reached the following categories: emerged from the analysis the following categories: historical conceptualization of the development of skills; Essential skills and individual; contributions to knowledge in Management Skills in Nursing. This study showed that healthcare organizations have not adopted a Management Competency, probably because it is a tool that requires specific knowledge and learning, proving that it is necessary to alert the nurses to be prepared to change management, seeking development in hospital management and expanding knowledge, because the Management Competency can be an instrument of great value to the Nursing Staff.

Permeating this thread other authors, 12 by means of a qualitative, exploratory, descriptive study, using the dejouriano theoretical framework, aimed to understand the meaning of being a nurse in the managerial function in intensive care units and feelings arising from this function. This study showed that for these professional management means providing patient care, administering nursing care and the health care team. And the feelings of pleasure are related to: patient care, develop teamwork, the result of work and external recognition.

In another study of theoretical reflection, 13 which sought to reflect on about the skills of nurses for the management of health services. It became clear that most nurses are not prepared to accept other forms of organization different from classical structure, adopted for many years in nursing. Some features of this style of management, and the fragmentation of activities, impersonality in relationships, centralization of power and the rigid hierarchy are still striking in nursing work. Against the message beyond the practical experience they need to seek professional knowledge through continuing education in order to maintain the ideal of profession that is excellence in care.

In another study of literature review, 14 the authors tried to present results from the use of Total Quality Management tool, proving that this type of instrument provided a gain with respect to human resources ensuring internal customer satisfaction in your work environment. The patient had their needs met, there was recognition of the society and also improvement in the hospital statistics. Noting that while nurse managers they need expertise in the area of management in order to be able to give sustainability to the nursing service.

It appears from the foregoing that these management trends present major challenges, there is need for paradigm shift in relation to the nurse manager. In a study of reflection on his doctoral thesis, 15 in which an abstraction of the theory described by expert authors on the subject and to put into practice of management by competence in nursing was conducted. These authors emphasize that the professional competence lists attributes of knowledge, skill and attitude called CHA, to add value to the health organization focused on the customer. It is essential to awaken the entire team, responsibility and effective concern for the patient, family and visitors. The professional is constituted as the inspirational leader of his group. The managerial competence of nurses can provide the opportunity for human resource development and promote enchantment in serving customers, making a difference in healthcare organizations.

Collaborating with the foregoing, the authors, reflect 16 Viewed from the theoretical reflection on different instruments care and management measure used to determine the severity of patients, quantification of care demands, estimated real need for nurses and cost of intensive care, these instruments makes the management facilitators. The study was approached different measuring instruments aimed at classifying patients in intensive care units, considering both the severity indices as the workload of nursing, looking fostering discussions about the advantages and difficulties inherent in the implementation of these instruments .

Other authors, 17 by descriptive research, qualitative approach, the document type, aimed at comparing the description of two positions representing the Nursing Service, adopted in different direction and coordination managerial models. The resultadosevidenciaram several changes in the description of the positions and, among them, the term Direction of Nursing for the Coordination of Nursing, with the abolition of autonomy and decision-making on matters pertaining to profession. Knowledge and competence in professional practice are conditions for nurses to keep their autonomy and representation in the organizational structure.

In a recent study, over 18 professional competencies necessary for nurses to work in the Intensive Care Unit, demonstrated that this nurse needs to manage while performing nursing care are more complex, have conditions and autonomy for decision-making from the technical and scientific knowledge, possess leadership skills, communication, promote and participate in ongoing training through continuing education, be able to manage the human and material resources. Aggregating these values tied to professional practice, can provide insight to set guidelines for building the differentiated profile of nurses who expect and demand today.

CONCLUSION

Finally, the purpose of this discussion and reflection is to amplify and encourage discourse on the (s) type (s) of professional (s) we need today. Since, as individuals and unfinished professionals are in constant process of formation. Process which permeates some variables which is the pursuit of knowledge. This knowledge is an endless improves speed and as transforming agents of this current reality is, within the academy is in the hospital environment need to accompany her in order to be able to meet the current demands seeking to pursue the profession independently, but ruled on technical knowledge -scientific.

As lifelong learners, we lack and need to discuss and reflect on our professional practice, finding in the process of continuing education, professional training bias having as objective the greater excellence of service and care.

References

Almeida ML, MLH Segui, Bernardino E, Meier MJ, Peres M(2011). direction or coordination? Rethinking the institutional representation of nursing. Rev Bras Enferm. Brasilia.64 (3): 521-526.

Alves VLS, Feldman LB(2011) Health Managers under quality: management competence and multidisciplinary approach. São Paulo (SP): Martinari. Andrade MM(1997). Introduction to the methodology of scientific work. 2nd ed. São Paulo (SP): Atlas.

Balsanelli AP, Jericho MC(2005). The reflections of total quality management in Brazilian hospitals. Acta Paul Enferm. 18(4):397-402.

CamelSHH(2012). Professional competence of nurses to work in intensive care units: an integrative review. Rev. Latin Am. Nursing. 20 (1): [09 screens]

Cunha I, Neto FRGX(2006). Managerial skills of nurses: a new old challenge? Text Context Enferm, Florianopolis, 2006 Jul-Sep; 15 (3): 479-482.

Figueiredo MA(2008). Method and Methodology in Scientific Research. 3rd ed. São Paulo (SP): Yendis;

Leonello VM, Oliveira MAC(2008). Skills for nursing education activities. Rev Latino-am nursing. 16:2.

Martins JT, Robazzi MLCC, Marziale MHP Garanhani ML, Haddad MCL(2009). Meanings management intensive care unit for nurses. Rev Gaucha Enferm, Porto Alegre (RS). 30 (1):113-119.

Ministry of Health. National Health Surveillance Agency(2010). Resolution - RDC No. 07 of February 24, 2010 # 37 -. DOU 25/02/10 - Section 1 - p. 48.

Pitthan LO, Guido LA, Linch GFC(2010). Reflection on the management of nursing: we are all responsible? Rev Enferm UFPe On Line. 4(1):421-428.

Resck ZMR, Gomes ELR(2008). The training and the nursing management practice: pathways for transforming praxis. Ver Latin am Nursing 16:1. Rios TA(2010). The ongoing construction of competence. In: E. Rovai (Org). Competence and skills: critical contribution to the debate. São Paulo

Rios TA(2010). The ongoing construction of competence. In: E. Rovai (Org). Competence and skills: critical contribution to the debate. São Paulc (SP): Cortez.

Rios TA(2011). Ethics and competence. 20th Ed São Paulo (SP): Cortez.

Rovai E(2010). Competence and skills: critical contribution to the debate. São Paulo (SP): Cortez.

Ruthes RM, Cunha I(2007). Controbuições for management knowledge on nursing management by competence. Rev Gaucha Enferm, Porto Alegre (RS). 28(4):570-575.

Ruthes RM, Feldman LB, Cunha I(2010). Customer Focus: essential tool in the management of competence in nursing. Rev Bras Enferm, Brasilia 63(2): 317-2.

Tranquitelli AM, Padilha KG(2007). Classification of patients as management tools in Intensive Care Units System. Rev Esc Enferm USP. 41(1):141-146.